

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.  
Registrations expire on January 31 unless a renewal is  
submitted between December 1 and January 31.

643  
Lobbyist's Registration Number

## Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 3401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

## FOR OFFICE USE ONLY

Postmark Date: 1/21/98

REG  
1330844

✓H1245  
\$110.00  
wmt

1. NAME Hill Trey (Sam H. Hill)  
Last First MI

2. BUSINESS PHONE 318-268-4420  
Area Code and Phone Number

3. BUSINESS ADDRESS P. O. Box 4331 Lafayette, LA 70502-4331  
Street and No. City State Zip

4. EMPLOYER Trans Louisiana Gas Company

5. EMPLOYER'S ADDRESS P. O. Box 4331 Lafayette, LA 70502-4331  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name ☒ Trans Louisiana Gas Company

Address P. O. Box 4331, Lafayette, La. 70502-4331

Business or purpose Natural Gas Utility Company

Does this person pay you? Yes

If No, who pays you? \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

HAND DELIVERED

# LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
5. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

State of LOUISIANA

Parish of LAFAYETTE

Before me, the undersigned authority, personally came and appeared Trey Hill, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

Trey Hill  
Signature of Lobbyist

Sworn to and subscribed before me on this 16<sup>th</sup> day of

January, 1998.

Christine Mercier-Labor  
Notary Public

Rev. 8/97

